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Substitute for form 1449/PTO	Complete if Known		
	Application Number	Unknown	
INFORMATION DISCLOSURE	Filing Date	Herewith	
	First Named Inventor	Robert M. Steinhoff	
STATEMENT BY APPLICANT	Art Unit	Unknown	
(Use as many sheets as necessary)	Examiner Name	Unknown	
Sheet 1 of 1	Attorney Docket Number	TI-35705	

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Examiner Initials*	Cite No. ³	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
7		Number-Kind Code ^{2 (f known)}	+		· ignos/pposi
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Examiner Initials*	Cite No.1	Foreign Patent Document	Publication Oate MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages Or Relevant Figures Appear	П
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Examiner Signature	/Ronald W. Leja/	(09/28/2006)	Date Considered	09/28/2006

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